

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 05/07/2012
FORM APPROVED
OMB NO. 0938-0391

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | | X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G442 | | X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING | | X3) DATE SURVEY COMPLETED 03/16/2012 | |
| NAME OF PROVIDER OR SUPPLIER RES CARE COMMUNITY ALTERNATIVES SE IN | | | | STREET ADDRESS, CITY, STATE, ZIP CODE 402 EWING LN JEFFERSONVILLE, IN 47130 | | | |
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| W0000 | <p>This visit was for the investigation of complaint #IN00104904.</p> <p>Complaint #IN00104904: Substantiated, federal/state deficiencies related to the allegation(s) are cited at W120, W149, W153 and W154.</p> <p>Dates of Survey: March 5, 6, 7, 8, 12, 13 and 16, 2012.</p> <p>Facility Number: 000956 Provider Number: 15G442 AIMS Number: 100244760</p> <p>Surveyor: Dotty Walton, Medical Surveyor III.</p> <p>The following deficiencies reflect state findings in accordance with 460 IAC 9. Quality Review completed 4/16/12 by Ruth Shackelford, Medical Surveyor III.</p> | | | W0000 | | | |

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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| W0120 | <p>483.410(d)(3) SERVICES PROVIDED WITH OUTSIDE SOURCES The facility must assure that outside services meet the needs of each client.</p> <p>Based on observation and interview for 3 of 3 sampled clients (A, B and C), and 4 additional clients (D, E, F and G), the residential agency failed to disseminate information and provide training to their day services provider to ensure each day services employee understood their rights and responsibilities pertaining to the Elder Justice Act; which requires specific individuals in applicable long term care facilities to report any reasonable suspicion of crimes committed against a resident of that facility; (pursuant to 6703(B)(3) of The Patient Protection and Affordable Care Act of 2010 according to section 1150B of the Social Security Act.)</p> <p>Findings include:</p> <p>During observations at the day services provider on 3/06/12 from 12:15 PM until 1:15 PM and on 3/08/12 from 1:00 PM until 2:30 PM, clients B, C, D, E, F, and G were observed to be working at the day services provider (not affiliated with the residential agency). During the various times of the observation periods, workshop staff #9, #10, #11 and #12 interacted/worked with the clients.</p> | | W0120 | <p>W120: The facility must assure that outside services meet the needs of each client Corrective Action: (Specific) The Operations Manager for SGL will meet with the Program Director of the workshop to provide/ensure that all workshop staff are trained on the Abuse, Neglect Policy and Procedure as pertaining to the Elder Justice Act. How others will be identified: All Program Coordinators will ensure that all workshop staff are trained on the Abuse, Neglect Policy and Procedure as pertaining to the Elder Justice Act. Measures to be put in place: The Operations Manager for SGL will meet with the Program Director of the workshop to provide/ensure that all workshop staff is trained on the Abuse, Neglect Policy and Procedure as pertaining to the Elder Justice Act. Monitoring of Corrective Action: All Program Coordinators will ensure that all workshop staff are trained on the Abuse, Neglect Policy and Procedure as pertaining to the Elder Justice Act.</p> | | 04/28/2012 | |

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| | <p>Environmental tours of the facility during the observation times indicated no posted documentation regarding the Elder Justice Act and the staff's rights/responsibilities thereof.</p> <p>An incident report dated 3/01/12 (reviewed 3/05/12 3:00 PM) indicated workshop staff had witnessed client A (female) exiting a bathroom together with a male peer at 11:00 AM on 3/01/12. Client A was interviewed (3/01/12 at 11:45 AM) with assistance from facility staff #5 (acting house manager). Client A indicated she was using the restroom when the male peer knocked on the restroom door wanting entry. She indicated she let him into the restroom (single stall bathroom which locked on the inside). The incident report alleged client A's "pants were down" while in the bathroom with the male peer and he touched her body in a sexual manner with his body. The male peer told client A to tell no one of the encounter. According to the incident report, client A "stated multiple times that she was scared."</p> <p>On 3/08/12 at 2:30 PM workshop supervisory staff #9 stated "I have never seen this," when documents pertaining to the Elder Justice Act and reporting any reasonable suspicion of crimes committed against facility residents was offered for</p> | | | | | | |

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| | <p>review. The interview indicated day services staff had not been trained and there was no posted information regarding the Elder Justice Act and the staff's rights/responsibilities thereof. The interview indicated the incident of alleged sexual molestation by a peer affecting client A had not been reported to the local police.</p> <p>Interview with workshop supervisory staff #9 and #10 on 3/16/12 at 2:30 PM indicated the residential agency had not provided training with the day services agency so they were not aware of the reporting requirements of the Elder Justice Act in regards to law enforcement. "Law Enforcement" is defined in section 2011(14) of the ACT (as added by section 6703(a)(1)(C) of the Affordable Care Act) as the full range of potential responders to abuse, neglect, or exploitation of covered individuals including, but not limited to, police and sheriffs (reviewed ACT 3/08/12 10:00 AM).</p> <p>This federal tag relates to complaint #IN00104904.</p> <p>9-3-1(a)</p> | | | | | | |

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| W0149 | <p>483.420(d)(1) STAFF TREATMENT OF CLIENTS The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect or abuse of the client.</p> <p>Based on record review and interview, for 1 of 1 facility investigations of reportable incidents (alleged sexual abuse, client A) reviewed, the facility failed to implement policies and procedures which ensured all allegations of abuse/neglect/exploitation of clients were reported to applicable agencies and were thoroughly investigated.</p> <p>Findings include:</p> <p>Review of day services' incident reports was done on 3/05/12 at 3:00 PM. The incident report review indicated the following allegation of client to client sexual molestation:</p> <p>An incident report dated 3/01/12 indicated workshop staff #3 had witnessed client A (female) exiting a bathroom together with a male peer on 3/01/12 at 11:00 AM. Client A was interviewed (on 3/01/12 at 11:45 AM) with assistance from facility staff #5 (acting house manager). Client A indicated she was using the restroom when the male peer (client D) knocked on the restroom door wanting entry. She indicated she let him into the restroom</p> | | | W0149 | <p>W149: The facility must develop and implement written policies and procedures that prohibit mistreatment, neglect or abuse of the client. Corrective Action: (Specific) The Quality Assurance staff will be retrained that allegations of mistreatment, neglect or abuse (which includes sexual molestation) as pertaining to the Elder Justice Act will be thoroughly investigated. Applicable agencies, such as the local police/law enforcement agency will be notified of the allegations. How others will be identified: (Systemic) All staff are trained on the Abuse, Neglect, Exploitation Policy and the Elder Justice Act during orientation. At annual trainings staff are retrained on the Abuse, Neglect, Exploitation Policy and Procedure and the Elder Justice Act. Measures to be put in place: The Quality Assurance staff will be retrained that allegations of mistreatment, neglect or abuse (which includes sexual molestation) as pertaining to the Elder Justice Act will be thoroughly investigated. Applicable agencies, such as the local police/law enforcement agency will be notified of the allegations. Monitoring of Corrective Action: The</p> | | 04/28/2012 |

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| | <p>(single stall bathroom which locked on the inside). The incident report alleged client A's "pants were down" while in the bathroom with the male peer and he touched her body in a sexual manner with his body. The male peer told client A to tell no one of the encounter. According to the incident report, client A "stated multiple times that she was scared."</p> <p>Review of the residential agency's reportable incident reports on 3/05/12 at 4:07 PM indicated they had been notified of the incident on 3/01/12 but there was no evidence the allegation of sexual misconduct with client A and a male peer had been reported to a law enforcement agency/police. The agency's 3/07/12 investigation of the 3/01/12 incident was reviewed on 3/08/12 at 5:15 PM. The investigation contained no evidence the local law enforcement had been notified regarding the allegation of sexual molestation as prescribed by the Elder Justice Act. "Law Enforcement" is defined in section 2011(14) of the ACT (as added by section 6703(a)(1)(C) of the Affordable Care Act) as the full range of potential responders to abuse, neglect, or exploitation of covered individuals including, but not limited to, police and sheriffs (reviewed ACT 3/08/12 10:00 AM).</p> | | | | Executive Director reviews all investigations to ensure that all allegations of mistreatment, neglect, abuse, and the Elder Justice Act are thoroughly investigated and that appropriate agencies are notified. | | |

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| | <p>The agency's 3/07/12 investigation of the 3/01/12 incident was reviewed on 3/08/12 at 5:15 PM. The investigation's summary indicated "It is the conclusion of the investigation committee that the allegation of [client A] and [male peer/client D] having sexual intercourse was unsubstantiated. The allegation was unsubstantiated due to the results of her exam at Urgent Care."</p> <p>The investigation process did not address other areas of rights violations (intimidation to gain access to the restroom while client A was in it, possibility of seeing client A in various stages of undress, possibility of sexual coercion/inappropriate touching or other forms of sexual exploitation/molestation).</p> <p>Workshop staff #3 was interviewed on 3/06/12 at 1:30 PM. The staff indicated clients A and D had been observed leaving a single stall restroom at the same time on 3/01/12 at 11:00 AM. The interview indicated client D was supposed to be monitored by residential staff who accompanied him to the workshop to monitor/intervene with his behaviors (inappropriate sexual interaction, defined as the client touching others without consensual agreement, physical and verbal aggression, noncompliance with tasks/prompts by staff and stealing). Workshop staff #9 was interviewed on</p> | | | | | | |

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| | <p>3/08/12 at 1:30 PM and stated client D could be "intimidating" and female workshop consumers and staff had complained he made them feel uncomfortable in his manner of addressing them in a sexually provocative manner.</p> <p>The "Abuse/Neglect/Exploitation Policy and Procedure" component of the agency's 10/25/10 Operational Policy and Procedure Manual was reviewed on March 8, 2012 at 12:00 PM. The review indicated the agency prohibited sexual abuse of clients. The definition of sexual abuse was as follows:</p> <p>"1. The act or failure to act, that results or could result in emotional injury to an individual.</p> <p>2. The act of insulting or profane language or gestures directed toward an individual that subject him or her to humiliation or degradation.</p> <p>3. A non-consensual act of a sexual nature involving an individual. The act may be used for sexual gratification of the perpetrator or a third party.</p> <p>4. Anyone who allows or encourages forced sexual activity."</p> <p>Workshop staff #9 was interviewed on 3/08/12 at 1:30 PM and indicated the police had not been notified regarding the incident.</p> | | | | | | |

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| | <p>Residential agency administrative staff #1 was interviewed on 3/16/12 at 1:53 PM and indicated the agency prohibited sexual abuse of clients and investigated all allegations. The interview indicated there had been no additional reports (to law enforcement) concerning the incident of 3/01/12 with client A and the male peer.</p> <p>This federal tag relates to complaint #IN00104904.</p> <p>9-3-2(a)</p> | | | | | | |

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| W0153 | <p>483.420(d)(2) STAFF TREATMENT OF CLIENTS</p> <p>The facility must ensure that all allegations of mistreatment, neglect or abuse, as well as injuries of unknown source, are reported immediately to the administrator or to other officials in accordance with State law through established procedures.</p> <p>Based on record review and interview, the facility failed for 1 of 1 investigation regarding alleged client to client abuse (sexual molestation) (client A), to immediately report allegations of abuse/neglect to the Police Department.</p> <p>Findings include:</p> <p>Record review of facility incident reports was done on 3/05/12 at 3:00 PM and indicated the following:</p> <p>An incident report dated 3/01/12 indicated workshop staff had witnessed client A (female) exiting a bathroom together with a male peer at 11:00 AM on that date. Client A was interviewed on 3/01/12 at 11:45 AM with assistance from facility staff #5 (acting house manager). Client A indicated she was using the restroom when the male peer knocked on the restroom door wanting entry. She indicated she let him into the restroom (single stall bathroom which locked on the inside). The incident report alleged client A's "pants were down" while in the</p> | | | W0153 | <p>W153: The facility must ensure that all allegations of mistreatment, neglect or abuse, as well as injuries of unknown source are reported immediately to the administrator or to other officials in accordance with State law through established procedures. Corrective Action: (Specific) The Quality Assurance staff will be retrained that allegations of mistreatment, neglect or abuse (which includes sexual molestation) as pertaining to the Elder Justice Act will be thoroughly investigated. Applicable agencies, such as the local police/law enforcement agency will be notified of the allegations. How others will be identified: (Systemic) During orientation training and during the annual training, all staff are trained/retrained on the Abuse and Neglect and Exploitation Policy and Procedure, as well as the Elder Justice Act. Measures to be put in place: The Quality Assurance staff will be retrained that allegations of mistreatment, neglect or abuse (which includes sexual molestation) as pertaining to the Elder Justice Act will be thoroughly investigated.</p> | | 04/28/2012 |

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| | <p>bathroom with the male peer and he touched her body in a sexual manner with his body. The male peer told client A to tell no one of the encounter. According to the incident report, client A "stated multiple times that she was scared." The incident report dated 3/01/12 indicated the residential agency had been notified of the alleged incident on 3/01/12, but local law enforcement had not been notified as indicated by the Elder Justice Act. "Law Enforcement" is defined in section 2011(14) of the ACT (as added by section 6703(a)(1)(C) of the Affordable Care Act) as the full range of potential responders to abuse, neglect, or exploitation of covered individuals including, but not limited to, police and sheriffs (reviewed ACT 3/08/12 10:00 AM).</p> <p>Review of the residential agency's reportable incident reports on 3/05/12 at 4:07 PM indicated they had been notified of the incident on 3/01/12 but there was no evidence the allegation of sexual misconduct with client A and a male peer had been reported to a law enforcement agency/police. The agency's 3/07/12 investigation of the 3/01/12 incident was reviewed on 3/08/12 at 5:15 PM. The investigation contained no evidence the local police had been notified regarding the allegation of sexual molestation.</p> | | | | <p>Applicable agencies, such as the local police/law enforcement agency will be notified of the allegations. Monitoring of Corrective Action: The Executive Director reviews all investigations to ensure that all allegations of mistreatment, neglect, abuse, and the Elder Justice Act are thoroughly investigated and that appropriate agencies are notified.</p> | | |

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| | <p>Workshop staff #9 was interviewed on 3/08/12 at 1:30 PM and indicated the police had not been notified regarding the incident.</p> <p>Residential agency administrative staff #1 was interviewed on 3/16/12 at 1:53 PM and indicated there had been no additional reports concerning the incident of 3/01/12 with client A and the male peer.</p> <p>This federal tag relates to complaint #IN00104904.</p> <p>9-3-2(a)</p> | | | | | | |

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| STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION | | X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 15G442 | | X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING | | X3) DATE SURVEY COMPLETED 03/16/2012 | |
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| W0154 | <p>483.420(d)(3) STAFF TREATMENT OF CLIENTS The facility must have evidence that all alleged violations are thoroughly investigated.</p> <p>Based on record review and interview, for 1 of 1 facility investigations of reportable incidents (alleged abuse, client A) reviewed, the facility failed to ensure all allegations were thoroughly investigated.</p> <p>Findings include:</p> <p>Review of day services incident reports was done on 3/05/12 at 3:00 PM. The incident report review indicated the following allegation of client to client sexual molestation:</p> <p>An incident report dated 3/01/12 indicated workshop staff #3 had witnessed client A (female) exiting a bathroom together with a male peer at 11:00 AM on 3/01/12. Client A was interviewed on 3/01/12 at 11:45 AM with assistance from facility staff #5 (acting house manager). Client A indicated she was using the restroom when the male peer (client D) knocked on the restroom door wanting entry. She indicated she let him into the restroom (single stall bathroom which locked on the inside). The incident report alleged client A's "pants were down" while in the bathroom with the male peer and he touched her</p> | | W0154 | <p>W154: The facility must have evidence that all alleged violations are thoroughly investigated. Corrective Action: (Specific) The Quality Assurance staff will be retrained that allegations of mistreatment, neglect or abuse (which includes sexual molestation) as pertaining to the Elder Justice Act will be thoroughly investigated. Applicable agencies, such as the local police/law enforcement agency will be notified of the allegations. How others will be identified: (Systemic) During orientation training and during the annual training, all staff are trained/retrained on the Abuse and Neglect and Exploitation Policy and Procedure, as well as the Elder Justice Act. Measures to be put in place: The Quality Assurance staff will be retrained that allegations of mistreatment, neglect or abuse (which includes sexual molestation) as pertaining to the Elder Justice Act will be thoroughly investigated. Applicable agencies, such as the local police/law enforcement agency will be notified of the allegations. Monitoring of Corrective Action: The Executive Director reviews all investigations to ensure that all allegations of mistreatment, neglect, abuse, and the Elder</p> | | 04/28/2012 | |

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

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| | <p>body in a sexual manner with his body. The male peer told client A to tell no one of the encounter. According to the incident report, client A "stated multiple times that she was scared."</p> <p>Client A's record was reviewed on 3/06/12 at 2:30 PM and 3/07/12 at 5:15 PM. The reviews indicated an individual support plan/ISP with accompanying comprehensive functional/CFA assessment dated 4/11/11 by Program Coordinator staff #1. The ISP indicated the client's sister was her health care representative. The CFA indicated client A was assessed as requiring the assistance of a health care representative in the areas of medical, programming, behavioral, financial, and sexual. The CFA indicated the client had understanding but was "not likely to act responsibly" and "required supervision" in these areas. The record review indicated client A was not taken to an Urgent Care facility but facility staff #5 made an appointment with a gynecologist who practiced with the medical group she routinely saw for examinations.</p> <p>Documentation of client's A's 3/01/12 examination by a gynecologist was reviewed on 3/07/12 at 3:10 PM and indicated the client was being examined due to an alleged "sexual assault" and the client "states her anus hurts a bit when</p> | | | | Justice Act are thoroughly investigated and that appropriate agencies are notified. | | |

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| | <p>sitting." The examination indicated client A's right labia majora was found to be "inflamed" with a "small area of erythema (redness) on inner right labia majora, (about) 1.5 cm (centimeters) at (about) 7 o'clock position...."</p> <p>The agency's 3/07/12 investigation of the 3/01/12 incident was reviewed on 3/08/12 at 5:15 PM. The investigation's summary indicated "It is the conclusion of the investigation committee that the allegation of [client A] and [male peer/client D] having sexual intercourse was unsubstantiated. The allegation was unsubstantiated due to the results of her exam at Urgent Care."</p> <p>The investigation process did not address other areas of rights violations (intimidation to gain access to the restroom while client A was in it, possibility of seeing client A in various stages of undress, possibility of sexual coercion/inappropriate touching or other forms of sexual exploitation/molestation).</p> <p>Workshop staff #3 was interviewed on 3/06/12 at 1:30 PM. The staff indicated clients A and D had been observed leaving a single stall restroom at the same time on 3/01/12 at 11:00 AM. The interview indicated client D was supposed to be monitored by residential staff who accompanied him to the workshop to</p> | | | | | | |

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| | <p>monitor/intervene with his behaviors (Inappropriate sexual interaction, defined as the client touching others without consensual agreement, physical and verbal aggression, noncompliance with tasks/prompts by staff and stealing). Workshop staff #9 was interviewed on 3/08/12 at 1:30 PM and stated client D could be "intimidating" and female workshop consumers and staff had complained he made them feel uncomfortable in his manner of addressing them in a sexually provocative manner.</p> <p>This federal tag relates to Complaint #IN00104904.</p> <p>9-3-2(a)</p> | | | | | | |